

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVN370AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/20/2009
NAME OF PROVIDER OR SUPPLIER SIERRA PLACE RETIREMENT COMM		STREET ADDRESS, CITY, STATE, ZIP CODE 1111 W COLLEGE PKWY CARSON CITY, NV 89703		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 3/18/09 and completed on 3/20/09. The facility received an annual survey grade of C. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for 76 Residential Facility for Group beds for elderly and disabled persons, Category II residents. The census at the time of the survey was 61. Fifteen resident files were reviewed and 11 employee files were reviewed. One discharged resident file was reviewed. The following deficiencies were identified:	Y 000		
Y 255 SS=I	449.217(6)(a)(b) Permits - Comply with NAC 446 NAC 449.217 6. A residential facility with more than 10 residents must: (a) Comply with the standards prescribed in chapter 446 of NAC. (b) Obtain the necessary permits from the Bureau of Health Protection Services of the Division.	Y 255		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 255	<p>Continued From page 1</p> <p>This Regulation is not met as evidenced by: Based on observation, record review, and interview from 3/18/09 to 3/20/09, the facility failed to ensure its kitchen complied with State standards for the storage, preparation and distribution of food.</p> <p>Findings include:</p> <p>Food Temperatures Food items were observed being held in plastic containers on ice at the dining room salad bar. According to staff, the food items were left on the ice from 11:00 AM to 6:00 PM daily. Food temperatures were taken at 3:00 PM with the following results:</p> <ul style="list-style-type: none"> - Potato salad - 42 degrees Fahrenheit (F), - Macaroni salad - 45 degrees F, - Egg salad - 43 degrees F, - Ham salad - 45 degrees F, and - Fruit salad - 43 degrees F. <p>The dining services director stated that before January of 2009, the salad bar was brought out for two hours at lunch and for two hours at dinner, but was now being left out during the day because "we have less staff now." He confirmed that temperatures of the salad bar items were not being checked.</p> <p>The facility had a dining system whereby four different menu items could be selected for the lunch and dinner meals that were all prepared at 11:00 AM. These food items were held hot for six hours until dinner and additional quantities of the</p>	Y 255			

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Y 255	<p>Continued From page 2</p> <p>same foods were cooked and added to the steam table as needed. The foods were not reheated after two hours to 165 degrees F and discarded after four hours per U.S. Food Code guidelines. A staff person (and acting dietitian) stated that the new food service system was implemented in January of 2009 in order for the dining room to feel more like a restaurant. At 2:30 PM the temperature of the mashed potatoes being held at the steam table was 130 degrees F.</p> <p>According to NAC 446.155, potentially hazardous food must be kept at an internal temperature of 40 degrees F or below or at 140 degrees F or above while being displayed or served.</p> <p>Foods containing mayonnaise, such as the potato, macaroni, egg and ham salads, are especially hazardous if not maintained at 40 degrees F or below. Temperatures were not being checked or recorded to ensure the attainment of proper internal temperatures of all potentially hazardous foods (NAC 446.120) nor was food being maintained per U.S. Food Code Guidelines.</p> <p>Refrigerators The following outdated foods were observed in the refrigerators:</p> <ul style="list-style-type: none"> - Prepared thousand island dressing (2/12/09), - Ranch dressing (3/7/09), - Remoulade sauce (opened 1/22/09), and - Opened container of sour cream (best by 3/10/09). <p>The following undated foods were observed in the refrigerators:</p> <ul style="list-style-type: none"> - Prepared bowls of chicken salad, fruit salad, spinach dip, and tartar sauce; 	Y 255		

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Y 255	<p>Continued From page 3</p> <ul style="list-style-type: none"> - Leftover ham and roast beef; - Opened containers of sour cream; and - Opened containers of whipped cream cheese spread. <p>Freezer An unsealed, undated pan of prepared cake/ice cream dessert was observed being stored in a freezer.</p> <p>Dry Food Storage Three dented sauerkraut cans were observed in a food storage room. Five brooms were being stored next to a stack of plates and the brooms were touching bags of coffee.</p> <p>Sanitation Rodent droppings were observed in the juice dispenser cabinet in the dining room along with cracker crumbs. The juice dispenser cabinet was not designed for effective cleaning. The omelet skillets were not being cleaned and sanitized after each use. The slicer and can opener blade were soiled and were not being washed, rinsed, and sanitized after each use. The 3-bin sink area was soiled. There was mold observed on dish tables. Spillage was noted under the stove and 2-door freezer.</p> <p>Kitchen Personnel Kitchen staff were observed using bare hands while preparing food. None of the kitchen staff had training in Servesafe or had evidence of a similar training.</p> <p>Equipment The microwave oven and mixer did not meet NSF International Sanitation Standards. The dish area was illuminated with a 15-foot candle lighting level instead of the required 50-foot level.</p>	Y 255		

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Y 255	Continued From page 4 At the conclusion of the NRS 446 food establishment inspection, the facility received a score of 66% out of a possible 100%. The state of the kitchen prompted a review of facility records for the presence of gastrointestinal type illnesses among residents. Review of the records indicated a significant increase in reported symptoms of nausea, vomiting and diarrhea in the past four months. During December of 2008, two cases were identified. Two additional cases were identified in January of 2009. During February of 2009, eight cases were identified. Seventeen cases were identified during the timeframe between March 1, 2009 and March 18, 2009, the day of the survey. One of the residents was admitted to the local hospital for treatment of a gastrointestinal type illness. Per NRS 446.880, the Food Establishment (FE) permit was summarily suspended on 3/18/09. Meals for the residents were ordered to be provided by approved permitted restaurants in the vicinity of the facility. On 3/20/09, the FE permit was re-issued after the kitchen was re-inspected. In addition, there were multiple repeat deficiencies from the 3/26/08 - 4/16/08 annual State Licensure survey. Severity: 4 Scope: 3	Y 255			
Y 272 SS=C	449.2175(3) Service of Food - Menus NAC 449.2175 3. Menus must be in writing, planned a week in advance, dated, posted and kept on file for 90	Y 272			

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Y 272	Continued From page 5 days. This Regulation is not met as evidenced by: Based on record review and interview on 3/18/09, the facility did not ensure its menu was posted. Severity: 1 Scope: 3	Y 272		
Y 274 SS=C	449.2175(5) Service of Food - Substitutions NAC 449.2175 5. Any substitution for an item on the menu must be documented and kept on file with the menu for at least 90 days after the substitution occurs. A substitution must be posted in a conspicuous place during the service of the meal. This Regulation is not met as evidenced by: Based on record review and interview on 3/18/09, the facility did not ensure all food substitutions were documented. This was a repeat deficiency from the 3/26/08 - 4/16/08 annual State Licensure survey. Severity: 1 Scope: 3	Y 274		
Y 280 SS=E	449.2175(10)(a)-(d) Dietary Consultant & Services NAC 449.2175 10. The person providing services pursuant to subsection 9 shall provide those services not less	Y 280		

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Y 859	Continued From page 7 NAC 449.274 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician. This Regulation is not met as evidenced by: Based on record review on 3/18/09, the facility failed to ensure that 6 of 17 residents received an annual physical (Resident #6, #7, #8, #9, #10 and #11). Severity: 2 Scope: 2	Y 859			
Y 936 SS=F	449.2749(1)(e) Resident file NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto. This Regulation is not met as evidenced by:	Y 936			

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Y 936	Continued From page 8 Based on record review on 3/18/09, the facility failed to ensure that 8 of 17 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #3, #7, #8, #9, #10, #11, #13 and #14) which affected all residents. Severity: 2 Scope: 3	Y 936		

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